1	1 0 4	BUTIONS AND		Nor-	11.			State of Neva	
Name (pr		- INCE		e (if applicable)	scy -			39	
Mailing A	ddress (include city	nd DR.	Gardi	nerville	NV.	89460	775	District (if applicable - 265 - 63	
		and zap code)		,			Telephone No.		
-Mail Ad									
elect Ap	opropriate Box(es)	CANDIDA	TE PAC	☐ BAG ☐	POL PRT	Y IND	EXP NONPRO	OFIT CORP	
		AMENDE	MANNE	JAL FILING 🗀	PETITIONI	RS WHO IN		PETITION & RECE	
			•		OR EXPE	ND FUNDS II	N EXCESS OF 10K	FEITION & RECE	
Z	Annual Filing	- Due January	15 2006						
•	Period: January	1, 2005 - December	31, 2005						
]	Report #1	Due August 8, 2	006*					1 = 1	
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}	Report #2 Due Period: Aug. 4	9 — October 31, 1, 2006 — Oct. 26, 20	2006*				IANI -) 0 ==	
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J		— January 15, 7, 2006 — Dec. 31, 2					DEAN		
I							DEAN HELLER SECRETARY OF STATE		
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• Th		e filed by incum					,		
** Th	ird Report suff	ices for 2007 Ar	nual Filing	if candidate	ing for of also file	tice in the d Report !	· 2006 election c Nos. 1 and 2	ycle	
		RIBUTIONS SU						Cumulative From Beginning	
							This Period	Report Period # through End of	
								This Reporting Period	
1. T	otal Monetary Conti (See page 1 of ins	ributions Received in	Excess of \$1	00			2 = 0 0		
2. T		ibutions Received of	\$100 or Less				_ 3,500	00	
	(See page 2 of ins	truction sheet)						00	
3. I	otal Monetary Cont arty. (See page 2 o	ributions in the form of instruction sheet)	of loans guar	anteed by a third				4.5	
4. T	otal Monetary Cont	ributions in the form		vere forgiven		_		00	
(See page 2 of instr	uction sheet)			C.,	tive From -		00	
				This Period	Beginn				
						End of			
5. T	otal Amount of Me	onetary Contribution	ne		Period	por using			
F	Received								
6. To	Add Lines 1 through Stal Amount of Writt	4) (See page 2 of instead of the second of t	ruction sheet)		1	-	3,500	20	
C	Ontributions (When o	ommiment is funded, rep	ort as						
(S	ee page 2 of instruction	n sheet) d Contributions Rece	in and in		00				
	xoess of \$100	(See page 2 of instruct			∞				
				PENSES SUI	MMARY				
	otal Monetary Expe See page 2 of instr	nses Paid in Excess	of \$100				10 4 4	س ا	
9. To	otal Monetary Expen	ises Paid of \$100 or	Less				49,725	45	
(S 10. T	iee page 2 of instru otal Amount of All	iction sheet) Monetary Expense	e Daid				49,725 1,026 50,751	04	
(Ac	dd Lines 8 and 9)	(See page 2 of ins	Struction shee	et)			50 751	19	
11. ft	otal value of In Kind of \$100 (See page	l Expenses in Excess 3 of instruction she	S et)		00		, , , , ,		
12. Di	isposition of Unsper	nt Contributions rt #3 , Annual Repo	_		100				
day of	f the second mont	h after candidates o	lefeat or						
	bent does not run age 3 of instruction								
·		··	-	AEEIDAGG					
i Decia	re Under Pena	lty of Perjury Th	at the Fore	AFFIRMATIC going is True	» and Co	rrect.		,	
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Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 ND PARTY IF LOAN GUARANTEED BY 3 ND PARTY	NAME AND ADDRES. OF PERSON WHO FORGAVE THE LOAN IF DIFFERENT THAN CONTRIBUTOR
Peppermull Casinas 90 West Grove St. \$ 600 Reno, Nevada 89509	1-6-2005-	1,000.00			
Pash America. 1600 W. 74 St. + Worth, Tx. 76102	1-6-02005	500,00			
Barrick Manage Corp P. O. Box 1/2410 Salt Lake City, Ut. 841	1-7-2005	\$ 1,000.00			
CENPAC GO MARGINAVE Dr. 12 eno, NV. 89507	1-4-2005	\$1,000.00			

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IND C. HETTRICK AS

Office (if applicable)

39 District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF					
PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365		AMOUNT OF EACH EXPENS		
Carson City Yerada	۴	8-11	\$5000.00		
Sefington Lentucky	mast J	8-09	\$ 50,000.00		
Carson Fally Chamber 1513 US they 395 Gardnerville Havada 89410	A	9-5 12-8	\$ 100.00 \$ 15.00		
Sobie Sowden Vet Center 3333 Cambridge St. Jas Tegos Levada 89109	J		\$ 500,00		
Thinden, Herada 89403	4	4-1	\$ 160.00		
Sone Gree Framing Thinder Jevada	J	5-6	\$ 193.00		
Stockdale Creative 650 H. Sucerne St.	D	5-16	\$ 625.00		
Parson City, Jerada	A	2-2	040.00		
laxita lebeseeman asson City Levada	A	8-4 8	125.00		
iti Cards 20. BOX 44167 aclsonv. He, 71 32231	J	0-17 8	525,57		
reance Troup of de Uxion & 400 Landria, Va 22314	-J 3		17,588.00		
you Hettrich 75 Alenward Dr. ardnoville, Jevada 89460	6 91	15	00.00 50.00 34.19 50.00		

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PAGE_3_OF_4

Name (print) C. Hettrick

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page NRS 294A.365		CH AMOUNT OF EACH EXPENS
P.O. Box 11328 St. Leterbug 41. 33733	A	1-4 3-9 5-4 6-10	11.07 37.36 91.17
7 7		6-16 7-20 10-4	28.82 70.33 27.73 12.14
American Sepress P.O. Box 360002 4. Sauderdale, 71 33336	ا ا ا	11-10 1-7 0-17 3-10 3-10	30.08 726.64 64.05 116.50
	J A A C	5-6 8-11 9-6 9-6	80.00 147.00 60.98 245.11
	A C	12-10	290.51 111.47 182.32
Mentil Communications/ 0.0.80x 54977 Sprint us Angeles; Ca. 90054	A	1-7 2-17 3-10 4-11	5.29 119. 25 59.00
))	d	5-17 6-16 7-00	59.11 59.11 60.53
	4	8-16 9-22 11-1	59.12 59.08 49.17
0. BOX 68055 nahaim Hills, la. 92817	A	1-4 1-31 3-9 5-6	11.97 12.11
2		6-15- 9-1 9-24	38.15 13.64 25.45
actu Comminscopiono 335 Prototype Dr. 200, YV. 89551	∫ ,	1-31 5-6	15.43.59 01.48 45.33 4.39
	1	7-20 4	19.16 10.60 16.66

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